| IN THE UNITED STATE | S PATENT AND TRADEMARK OFFICE |
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| In re Application of Todd A. Wolford et al. Serial No.: Filed: September 15, 2003 Title: METHOD OF MANUFACTURING AN ORTHOPAEDIC REAMER |) Group:) Examiner: G) |
| INFORMATIO | N DISCLOSURE STATEMENT |
| MS DD Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | |
| Sir: | |
| Applicant wishes to bring to the at | tention of the Examiner the documents identified on the |
| attached form PTO-1449. Applicant respe | ectfully requests that these documents be made of record in |
| the present application. | • |
| A copy of each of the documents is | s enclosed. |
| | poked the need for a payment of fee, or additional payment |
| | hereby conditionally petition therefor and authorize that |
| | Account No. 20-0095, TAYLOR & AUST, P.C. |
| Resp Todo Regi | pectfully submitted If T. Taylor stration No. 36,945 mey for Applicant |
| TTT/dc | CERTIFICATE OF MAILING |
| TAYLOR & AUST, P.C. 142 S. Main St. P.O. Box 560 Avilla, IN 46710 Telephone: 260 807 3400 | I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: MS DD, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on: September 15, 2003. Todd T. Taylor, Reg. No. 36,945 NAME OF REGISTERED REPRESENTATIVE |
| Telephone: 260-897-3400 Facsimile: 260-897-9300 | 111/1/5 |
| Encs.: Form PTO-1449 Return Postcard | SIGNATURE September 15, 2003 DATE |

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| INFORMATION DISCLOSURE STATEMENT | | | | | ENT | APPLICANT: Todd A. Wolford et al. | | | | | | | |
| | | | | | | FILING DATE: September 15, 2003 | | | GROUP: | | | | |
| | | | | | U.S | S PATENT | DOCUMENT | `S | | | | | |
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| EXAMINE | | | | | | E CONSIDE | | | | | | | |
| *Examiner: Init considered. Inc | tial if refer clude copy | rence considered, whe | ther or | not cita municat | ation is i | in conformance | with MPEP 609; | Draw line throug | h citatio | n if not in | conformance and | i not | |
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